## BEST AVAILABLE CO

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| Application or Docket Number |  |  |  |  |  |  |  |  |  |  |
|------------------------------|--|--|--|--|--|--|--|--|--|--|
| Application or Docket Numbe  |  |  |  |  |  |  |  |  |  |  |
| 17290                        |  |  |  |  |  |  |  |  |  |  |

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |  |   |                   |                            |                                 |                  |          | SMALL ENTITY  TYPE  OR        |                        |            | OTHER THAN SMALL ENTITY |                        |
|--|--|---|-------------------|----------------------------|---------------------------------|------------------|----------|-------------------------------|------------------------|------------|-------------------------|------------------------|
| TOTAL CLAIMS                                   |  |   | CI                | 4                          |                                 |                  |          | RATE                          | FEE                    | ] <u> </u> | RATE                    | FEE                    |
| FOR  |  |   | NUMBER FILED      |                            | NUMBER EXTRA                    |                  | Ī        | BASIC FEE                     | 370.00                 | OR         | BASIC FEE               | 740.00                 |
| TOTAL CHARGEABLE CLAIMS                        |  |   | € minus 20=       |                            | * —                             |                  | Ì        | X\$ 9=                        |                        | OR         | X\$18=                  |                        |
| INDEPENDENT CLAIMS 5 minus 3                   |  |   |                   |                            | * 3                             |                  |          | X42=                          |                        | OR         | X84=                    | &1.Z.                  |
| MULTIPLE DEPENDENT CLAIM PRESENT               |  |   |                   |                            |                                 |                  | ŀ        | +140=                         |                        | OR.        | +280=                   | 812                    |
| * If the difference in column 1 is less than:  |  |   |                   | ero, enter "0" in column 2 |                                 |                  |          | TOTAL                         |                        | OR         | TOTAL                   | 992.                   |
| CLAIMS AS AMENDED - PART II                    |  |   |                   |                            |                                 |                  |          | TOTALC                        |                        |            | OTHER                   |                        |
|  |  | (Column 1)  |                   | (Column 2) (Colum          |                                 |                  |          | SMALL ENTIT                   |                        |            | SMALL                   | 9                      |
| AMENDMENT A                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |                   | NUM<br>PREVI               | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |          | RATE                          | ADDI-<br>TIONAL<br>FEE |            | RATE                    | ADDI-<br>TIONAL<br>FEE |
| IDME   | Total  | . 9   | Minus             | ** >0                      |                                 | =                |          | X\$ 9=                        |                        | OR         | X\$18=                  |                        |
| AME  | independent                                    | * (Q  | Minus             | *** (0                     |                                 | =                |          | X42=                          |                        | OR         | X84=                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                            |                                 |                  |          | +140=                         |                        | OR         | +280=                   |                        |
|  |  |   |                   |                            |                                 |                  |          | TOTAL                         |                        | OR         | TOTAL<br>ADDIT, FEE     |                        |
| ADDIT. FEE                                     |  |   |                   |                            |                                 |                  |          |                               |                        |            |                         |                        |
| NT B   |  | CLAIMS REMAINING AFTER AMENDMENT                              |                   | NUM<br>PREVI               | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |          | RATE                          | ADDI-<br>TIONAL<br>FEE |            | RATE                    | ADDI-<br>TIONAL<br>FEE |
| DME  | Total  | *   | Minus             | **                         |                                 | =                |          | X\$ 9=                        |                        | OR         | X\$18=                  |                        |
| AMENDMENT                                      | Independent                                    | *   | Minus             | ***                        |                                 | ]=               |          | X42=                          |                        | OR         | X84=                    |                        |
| Ľ  | FIRST PRESE                                    | NTATION OF M  | ULTIPLE DEF       | PENDEN                     | TCLAIM                          |                  | <b>」</b> | +140=                         |                        | OR         | +280=                   |                        |
|  |  |   |                   |                            |                                 |                  | L        | TOTAL<br>ODIT, FEE            |                        | OR         | TOTAL<br>ADDIT, FEE     |                        |
|  |  | (Column 1)  |                   |                            | mn 2)                           | (Column 3)       |          |                               |                        | •          |                         |                        |
| AMENDMENT C                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |                   | NUM<br>PREV                | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE                          | ADDI-<br>TIONAL<br>FEE |            | RATE                    | ADDI-<br>TIONAL<br>FEE |
| ĬŽ<br>Ç  | Total  | *   | Minus             | **                         |                                 | =                |          | X\$ 9=                        |                        | OR         | X\$18=                  |                        |
| ME   | Independent                                    | *   | Minus             | ***                        |                                 | =                |          | X42=                          |                        | OR         | X84=                    |                        |
| <u> </u>                                       | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                            |                                 |                  | J        | +140=                         |                        | OR         | +280=                   |                        |
|  | If the entry in colu                           | ımn 1 is less than  | the entry in colu | ımn 2, wri                 | te "0" in co                    | olumn 3.         |          | TOTAL                         |                        | OR         | TOTAL                   |                        |
| -  | alf the "Highort Ni                            | umber Previously F<br>umber Previously I<br>mber Previously P | Paid For IN TH    | IS SPACE                   | is less th                      | an 3 enter "3."  |          | ADDIT. FEE  <br>and in the ap | propriate bo           | •          | ADDIT. FEE<br>olumn 1.  |                        |